86. 5

100.0

County: St. Croix GLENHAVEN, INC. 612 EAST OAK STREET Page 1 GLENWOOD CITY 54013 Phone: (715) 265-4555 Ownership: Nonprofit Church-Related Operated from 1/1 To 12/31 Days of Operation: 366 Operate in Conjunction with Hospital? Highest Level License: Skilled Operate in Conjunction with CBRF? No Title 18 (Medicare) Certified? Number of Beds Set Up and Staffed (12/31/00): 44 Yes Total Licensed Bed Capacity (12/31/00): Number of Residents on 12/31/00: 44 Average Daily Census: 41 37 ****************************** Age, Sex, and Primary Diagnosis of Residents (12/31/00) Services Provided to Non-Residents Length of Stay (12/31/00) Age Groups Home Health Care No Primary Diagnosis Less Than 1 Year 24.3 Supp. Home Care-Personal Care No 1 - 4 Years 37.8 Supp. Home Care-Household Services Developmental Disabilities Under 65 2.7 More Than 4 Years 37.8 No Day Services Mental Illness (Org. /Psy) No 32. 4 65 - 74 5.4 Respite Care Yes Mental Illness (0ther) 13. 5 75 - 84 32.4 100.0 Adult Day Care Alcohol & Other Drug Abuse 0.0 85 - 94 45.9 Yes Adult Day Health Care Para-, Quadra-, Hemi plegi c Full-Time Equivalent No 0.0 95 & 0ver 13. 5 Nursing Staff per 100 Residents (12/31/00) Congregate Meals No Cancer 0.0 Home Delivered Meals Fractures 100.0 No 0.0 Other Meals Cardi ovascul ar 65 & Over 97. 3 No 24. 3 **Transportation** No Cerebrovascul ar 5. 4 RNs 10.0 Referral Service No Di abetes 5.4 Sex LPNs 7.4 Other Services Nursing Assistants No Respi ratory 5. 4 Provide Day Programming for Mentally Ill Other Medical Conditions Male 13.5 Aides & Orderlies 44.0 8. 1

Method of Reimbursement

100.0

Femal e

Yes

No

Provi de Day Programming for

Developmentally Disabled

	Medicare (Title 18)				Medicaid (Title 19)			0ther			Pri vate Pay			Managed Care			Percent
	Per Diem			m	Per Diem		m	Per Die		m Per Diem			Per Diem Tota			Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	Ĭ	100. 0	\$159.99	18	72. 0	\$89. 36	Ŏ	0. 0	\$0.00	11		\$102.50	Ŏ	0. 0	\$0.00	30	81. 1%
Intermediate				2	8.0	\$74. 28	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	2	5. 4%
Limited Care				2	8.0	\$64. 23	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	2	5. 4%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				3	12.0	\$127.05	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	3	8. 1%
Traumatic Brain Inj	. 0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Dependen	t 0	0.0	\$0.00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	1	100.0		25 1	100.0		0	0.0		11	100.0		0	0.0		37	100.0%

Receiving Psychoactive Drugs

70.3

County: St. Croix GLENHAVEN, INC.

(Including Deaths)

Admissions, Discharges, and Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/00 Deaths During Reporting Period % Needi ng Total Assistance of Percent Admissions from: Activities of % Totally Number of Private Home/No Home Health 23.5 Daily Living (ADL) Independent One Or Two Staff Dependent Resi dents Private Home/With Home Health 0.0 Baťhi ng 0.0 70.3 29. 7 37 Other Nursing Homes 0.0 Dressing 5.4 86. 5 8. 1 37 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals 76. 5 Transferring 27.0 48.6 37 24. 3 29.7 40.5 29.7 37 0.0 Toilet Use 0.0 Eating 43. 2 48.6 8. 1 37 Other Locations ****** 0.0 Total Number of Admissions Continence Special Treatments 17 Receiving Respiratory Care
Receiving Tracheostomy Care
Receiving Suctioning
Receiving Ostomy Care Percent Discharges To: Indwelling Or External Catheter 2.7 10.8 Private Home/No Home Health 19.0 Occ/Freq. Incontinent of Bladder 54. 1 0.0 Private Home/With Home Health 9. 5 Occ/Freq. Incontinent of Bowel 10.8 0.0 Other Nursing Homes 0. 0 0.0 Acute Care Hospitals
Psych. Hosp. - MR/DD Facilities
Rehabilitation Hospitals Receiving Tube Feeding Receiving Mechanically Altered Diets 71.4 Mobility 0.0 Physically Restrained 0.0 0.0 27.0 0.0 Other Locations 0.0 Skin Care Other Resident Characteristics Deaths 0.0 With Pressure Sores 10.8 Have Advance Directives 91.9 Total Number of Discharges With Rashes Medi cati ons 5.4

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Ownershi p:		Bed Size:		Li censure:				
	Thi s	Nonprofit		Unde	Under 50		Skilled		Al l	
	Facility	Peer Group		Peer Group		Peer Group		Facilities		
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	93. 2	87. 8	1.06	87. 9	1. 06	84. 1	1. 11	84. 5	1. 10	
Current Residents from In-County	48. 6	82. 6	0. 59	72. 9	0. 67	83. 5	0. 58	77. 5	0. 63	
Admissions from In-County, Still Residing	41. 2	25. 9	1. 59	31. 0	1. 33	22. 9	1.80	21. 5	1.91	
Admissions/Average Daily Census	41.5	116. 8	0. 36	70. 7	0. 59	134. 3	0. 31	124. 3	0. 33	
Discharges/Average Daily Census	51. 2	117. 3	0.44	76. 4	0. 67	135. 6	0. 38	126. 1	0.41	
Discharges To Private Residence/Average Daily Census	14. 6	43. 9	0. 33	14. 6	1.00	53. 6	0. 27	49. 9	0. 29	
Residents Receiving Skilled Care	81. 1	91. 3	0.89	86. 1	0. 94	90. 1	0. 90	83. 3	0. 97	
Residents Aged 65 and Older	97. 3	97. 1	1.00	97. 8	1.00	92. 7	1. 05	87. 7	1. 11	
Title 19 (Medicaid) Funded Residents	67. 6	56. 2	1. 20	59. 8	1. 13	63. 5	1.06	69. 0	0. 98	
Private Pay Funded Residents	29. 7	37. 5	0. 79	37. 1	0.80	27. 0	1. 10	22. 6	1. 32	
Developmentally Disabled Residents	5. 4	0. 6	8. 69	1.4	3. 90	1. 3	4. 30	7. 6	0.71	
Mentally Ill Résidents	45. 9	36. 3	1. 26	36. 6	1. 26	37. 3	1. 23	33. 3	1.38	
General Medical Service Residents	8. 1	21. 1	0. 38	13. 0	0. 62	19. 2	0. 42	18. 4	0.44	
Impaired ADL (Mean)	49. 7	50.8	0. 98	50. 6	0. 98	49. 7	1.00	49. 4	1.01	
Psychological Problems	70. 3	50. 0	1.40	63. 4	1. 11	50. 7	1. 39	50. 1	1.40	
Nursing Care Required (Mean)	6. 8	6.8	1.00	8. 0	0.84	6. 4	1. 05	7. 2	0.94	